



13th October 2014

Dear Parent/Carer

RE:- PARENT GOVERNOR VACANCIES – ARK WILLIAM PARKER ACADEMY

- a) There is currently a vacancy for one parent governor on the Local Governing Body (LGB) of ARK William Parker Academy, and an election will take place shortly.
- b) Any parent who is elected must have a child at the school at the time of the election, but may continue to serve as a governor for two years, if he or she wishes, even if his or her child leaves school during that time.

All parents and carers of students at the school are eligible to stand as candidates, and vote in the election. If there are more candidates than vacancies a ballot will be held. Each parent/carers will have one vote for every parent governor vacancy.

When a candidate is elected, they will be required to undergo an enhanced disclosure DBS check.

If you would like to nominate a candidate, yourself or another parent/carers, you should return the attached form by 3 pm on Friday 24 October. Your child can bring this form to school, and hand to the student services office.

If nominating another parent/carers, please check with them that they are willing to stand, and ask them to sign the nomination form, and the declaration in the spaces provided.

Parent governors are very important in the life of the school, and I hope you will consider being a candidate. If you would like more information about the role, please contact jessica.wilks@arkonline.org in the first instance.

There is space on the nomination form for a personal statement in support of your nomination. Please do provide a statement as this helps parents/carers to vote in the event of a ballot.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Mark Phillips'.

Mark Phillips
PRINCIPAL

Parent Governor Nomination Form

YOU CAN NOMINATE YOURSELF OR ANOTHER PARENT/GUARDIAN

All the information on this form is confidential and will be held in accordance with the requirements of the Data Protection Act 1998.

When completing this form, could you ensure that the fields in **bold** are completed as this indicates required information. Please tick where appropriate and use CAPITAL LETTERS to complete this form.

School Name: _____

Please complete below details for the person nominated:

Title: _____
Forename(s): _____ **Surname:** _____

Address: _____ **Home Telephone:** _____
_____ **Work Telephone:** _____
_____ **Mobile:** _____
Postcode: _____

Email: _____

If you are nominating yourself, please complete and sign below. If you have nominated someone else please check that they are willing to stand and ask them to complete the remainder of this form, and then sign it and return it to the Academy.

The person nominated is a Parent/Guardian of _____ (name of child and year)

Gender: Male Female

Do you have a disability or long-term medical condition? Yes No

Ethnicity

<u>Asian</u>		<u>Black</u>		<u>White</u>		<u>Other</u>	
Bangladeshi	<input type="checkbox"/>	African	<input type="checkbox"/>	British	<input type="checkbox"/>	Other	<input type="checkbox"/>
British	<input type="checkbox"/>	Asian	<input type="checkbox"/>	European	<input type="checkbox"/>		
Chinese	<input type="checkbox"/>	British	<input type="checkbox"/>	Irish	<input type="checkbox"/>		
Indian	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>	Other	<input type="checkbox"/>		
Other	<input type="checkbox"/>	Other	<input type="checkbox"/>				

If you would rather not give this information please tick here

Signed: _____

CANDIDATE'S PERSONAL STATEMENT

Please use this space to provide a short statement in support of your nomination as a candidate for election as a parent governor. The statement might include something of your own experience; what you feel you can contribute as parent governor, why you decided to stand, etc.